

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	H.T.	1117	10-7-12-01
RESPONSE FORMALITY REVIEW	CK	1109	8/16/01

INDEX OF CLAIMS

- ✓ Rejected N Non-elected
- = Allowed I Interference
- (Through numeral)... Canceled A Appeal
- + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
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50	✓	✓	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

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11-13-01